

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Keith Taber</i>		<b>Position:</b> <u>1 or 2</u>	
<b>Station:</b> <i>G20</i>	<b>Date:</b> <i>3-18-13</i>	<b>Time:</b>	
<b>Vehicle Make:</b> <i>Toyota</i>	<b>Model:</b> <i>Tundra</i>	<b>Year:</b> <i>2000</i>	
<b>GVWR:</b> <i>-</i>	<b>Fuel Type:</b> <i>G</i>	<b>Registration Number:</b> <i>0343544</i>	
<b>Auditor:</b> <i>Gryese</i>		<b>Covert / Overt</b> (circle one)	
	<b>YES</b>	<b>NO</b>	<b>N/A</b>
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was Emissions testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?	<input checked="" type="checkbox"/>		
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was Catalytic Converter inspection required?	<input checked="" type="checkbox"/>		
a) Was Catalytic Converter inspection performed?	<input checked="" type="checkbox"/>		
4. Was Fuel Tank pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was Fuel Cap pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a Re-check from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?			
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was Curb Idle testing required?	<input checked="" type="checkbox"/>		
a) Was Curb Idle testing performed?	<input checked="" type="checkbox"/>		
<b>Comment:</b> <i>Safety</i>			

## DMV Lane Technician Observation Report

DMV Technician: <u>Jerry Layne</u>		Position: <u>1 or 2</u>	
Station: <u>Gov</u>	Date: <u>5-18-13</u>	Time:	
Vehicle Make: <u>Dodge</u>	Model: <u>Grand Prix</u>	Year: <u>1988</u>	
GVWR: <u>—</u>	Fuel Type: <u>G</u>	Registration Number: <u>587099</u>	
Auditor: <u>Gries</u>		Covert / <u>Overt</u> (circle one)	
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was Catalytic Converter inspection required?			
a) Was Catalytic Converter inspection performed?			
4. Was Fuel Tank pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was Fuel Cap pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a Re-check from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
New Castle and Kent Counties Only			
7. Was Two-Speed Idle testing required?			
a) Was Two-Speed Idle testing performed?			
Sussex County Only		<input checked="" type="checkbox"/>	
8. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Curb Idle testing performed?		<input checked="" type="checkbox"/>	
Comment:			

## DMV Lane Technician Observation Report

DMV Technician: <u>Tom Tedley</u>		Position: <u>1 or 2</u>	
Station: <u>G20</u>	Date: <u>3-18-13</u>	Time:	
Vehicle Make: <u>Toyota</u>	Model: <u>Tundra</u>	Year: <u>2006</u>	
GVWR: <u>-</u>	Fuel Type: <u>G</u>	Registration Number: <u>CL74174</u>	
Auditor: <u>Griesa</u>		Covert / <u>Overt</u> (circle one)	

  

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was Emissions testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?	<input checked="" type="checkbox"/>		
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was Catalytic Converter inspection required?	<input checked="" type="checkbox"/>		
a) Was Catalytic Converter inspection performed?	<input checked="" type="checkbox"/>		
4. Was Fuel Tank pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was Fuel Cap pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a Re-check from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?			
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was Curb Idle testing required?	<input checked="" type="checkbox"/>		
a) Was Curb Idle testing performed?	<input checked="" type="checkbox"/>		
Comment: <u>Safety for</u>			

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Steve Weeks</i>		<b>Position:</b> <u>1</u> or 2	
<b>Station:</b> <i>C720</i>	<b>Date:</b> <i>5-18-13</i>	<b>Time:</b>	
<b>Vehicle Make:</b> <i>MAZDA</i>	<b>Model:</b> <i>B2300</i>	<b>Year:</b>	
<b>GVWR:</b>	<b>Fuel Type:</b> <i>G</i>	<b>Registration Number:</b> <i>0246014</i>	
<b>Auditor:</b> <i>Arnesen</i>	<b>Covert / Overt</b> (circle one)		
	<b>YES</b>	<b>NO</b>	<b>N/A</b>
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was <b>Emissions</b> testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?	<input checked="" type="checkbox"/>		
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was <b>Catalytic Converter</b> inspection required?			
a) Was Catalytic Converter inspection performed?			
4. Was <b>Fuel Tank</b> pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was <b>Fuel Cap</b> pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a <b>Re-check</b> from a prior failure?			
a) Which re-check test is being performed? <u>1</u> 2 3 (circle one)	<input checked="" type="checkbox"/>		
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?			
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was <b>Curb Idle</b> testing required?	<input checked="" type="checkbox"/>		
a) Was Curb Idle testing performed?	<input checked="" type="checkbox"/>		
<b>Comment:</b> <i>Passed recheck</i>			

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Kevin Horsley</i>		<b>Position:</b> <u>1 or 2</u>	
<b>Station:</b> <i>Greene</i>	<b>Date:</b> <i>3-18-13</i>	<b>Time:</b>	
<b>Vehicle Make:</b> <i>Acura</i>	<b>Model:</b> <i>AL</i>	<b>Year:</b> <i>1998</i>	
<b>GVWR:</b> <i>-</i>	<b>Fuel Type:</b> <i>G</i>	<b>Registration Number:</b> <i>46278</i>	
<b>Auditor:</b> <i>Griesen</i>		<b>Covert / <u>Overt</u></b> (circle one)	

  

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was Emissions testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?	<input checked="" type="checkbox"/>		
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was Catalytic Converter inspection required?			
a) Was Catalytic Converter inspection performed?			
4. Was Fuel Tank pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was Fuel Cap pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a Re-check from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
7. Was Two-Speed Idle testing required?			
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
8. Was Curb Idle testing required?	<input checked="" type="checkbox"/>		
a) Was Curb Idle testing performed?	<input checked="" type="checkbox"/>		
<b>Comment:</b> <i>Failed safety window</i>			

## DMV Lane Technician Observation Report

<b>DMV Technician:</b> <i>Robert Harding</i>		<b>Position:</b> <i>1 or 2</i>	
<b>Station:</b> <i>GED</i>	<b>Date:</b> <i>3-18-13</i>	<b>Time:</b>	
<b>Vehicle Make:</b> <i>Toyota</i>	<b>Model:</b> <i>Camry</i>	<b>Year:</b> <i>2004</i>	
<b>GVWR:</b> <i>—</i>	<b>Fuel Type:</b> <i>G.</i>	<b>Registration Number:</b> <i>7595</i>	
<b>Auditor:</b> <i>Givens</i>		<b>Covert / Overt</b> (circle one)	
		<b>YES</b>	<b>NO</b>
<b>1. Did technician check vehicle paper work and verify VIN number?</b>			
		<input checked="" type="checkbox"/>	
<b>2. Was Emissions testing required?</b>			
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?			
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
<b>3. Was Catalytic Converter inspection required?</b>			
a) Was Catalytic Converter inspection performed?			
<b>4. Was Fuel Tank pressure testing required?</b>			
a) Was Fuel Tank pressure testing performed?			
<b>5. Was Fuel Cap pressure testing required?</b>			
a) Was Fuel Cap pressure testing performed?			
<b>6. Is this test a Re-check from a prior failure?</b>			
a) Which re-check test is being performed? <i>(1) 2 3</i> (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
<b>New Castle and Kent Counties Only</b>			
<b>7. Was Two-Speed Idle testing required?</b>			
a) Was Two-Speed Idle testing performed?			
<b>Sussex County Only</b>			
<b>8. Was Curb Idle testing required?</b>			
a) Was Curb Idle testing performed?			
<b>Comment:</b> <i>Brakes - Passed</i>			

Revised 7/26/12